

<b>CLAIMS ONLY</b>							SERIAL NO.	FILING DATE
							APPLICANT(S)	
<b>CLAIMS</b>								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		★	★
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
1	/							
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100								
TOTAL IND.	3	↓		↓		↓		↓
TOTAL DEP.	29	←		←		←		←
TOTAL CLAIMS	32							

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS